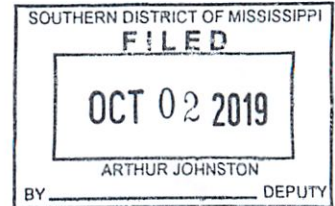


FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983
**IN THE UNITED STATES DISTRICT COURT
 FOR THE SOUTHERN DISTRICT OF MISSISSIPPI**

COMPLAINT

Larry E. Fairley R5636
 (Last Name) (Identification Number)
Larry E.
 (First Name) (Middle Name)
South Miss. Correctional Institution
 (Institution)
PO Box 1419 Leakesville, Ms. 39451
 (Address)
 (Enter above the full name of the plaintiff, prisoner and address
 of plaintiff in this action)



V.

CIVIL ACTION NUMBER:

1:19cv077LGRHW
 (to be completed by the Court)

Sheriff Keith Howard

Nurse Barnes
John and Jane Doe's
 (Enter the full name of the defendant(s) in this action)

Jury Trial Demanded.

GENERAL INFORMATION

- A. At the time of the incident complained of in this complaint, were you incarcerated?
 Yes (X) No ()
- B. Are you presently incarcerated?
 Yes (X) No ()
- C. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
 Yes () No (X)
- D. Are you presently incarcerated for a parole or probation violation?
 Yes () No (X)
- E. At the time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections (MDOC)?
 Yes () No (X)
- F. Are you currently an inmate of the Mississippi Department of Corrections (MDOC)?
 Yes (X) No ()

PARTIES

(In item I below, place your name and prisoner number in the first blank and place your present address in the second blank.)

I. Name of plaintiff: Larry E. Fairley Prisoner Number: R5636
 Address: South Mississippi Correctional
institution P.O. Box 1419 Leakesville, Ms.
39451

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions and places of employment of any additional defendants.)

II. Defendant: Keith Howard is employed as Sheriff
of the Facility at George County Correctional Facility
154 Industrial Road, Lucedale, Ms. 39452

The plaintiff is responsible for providing his/her address and in the event of a change of address, the new address of plaintiff as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

PLAINTIFF:

NAME: Larry E. Fairley ADDRESS: S.M.C.I. P.O. Box 1419 Leakesville, Ms. 39451

DEFENDANT(S):

NAME: Sheriff Keith Howard ADDRESS: George County Correctional Facility
154 Industrial Rd., Lucedale Ms. 39452

NAME: Nurse Barnes ADDRESS: George County Correctional Facility
154 Industrial Rd., Lucedale, Ms. 39452

OTHER LAWSUITS FILED BY PLAINTIFF

NOTICE AND WARNING

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

- A. Have you ever filed any lawsuits in a court of the United States? Yes () No (X)
- B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse of this page or additional sheets of paper.)

CASE NUMBER 1.

1. Parties to the action: None
2. Court (if federal court, name the district; if state court, name the county): None
3. Docket Number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) None

CASE NUMBER 2.

1. Parties to the action: _____
2. Court (if federal court, name the district; if state court, name the county): _____
3. Docket Number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) _____

STATEMENT OF CLAIM

- III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet(s) if necessary).

On the 23rd day of April, 2018. The plaintiff was arrested at his known Resident, 130 Maple Street Lucedale, Miss; The plaintiff was taken to the George County Correctional Facility, where he was booked in. The plaintiff finger was in great pain, and needed Medical attention. "See Attachment" A.

RELIEF

- IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

The plaintiff declares that the Defendant "Nurse Barnes" violated his 8th Amendment Constitutional Rights, when she failed to protect the plaintiff from a known risk of infection. "See Attachment" B.

Signed this 24 day of sept, 20 19.

I declare (or certify, verify or state) under penalty of perjury that the foregoing is true and correct.

Larry E. Fairley
Signature of plaintiff

The Booking officer a Ms. Edwards advised the plaintiff to contact a nurse Barnes. The plaintiff was not told at that time how to contact the nurse, nor get to see the nurse. The Evening of the 23rd of April approximately 6 p.m. nurse Barnes came around to the zones of the facility for med. pass. The plaintiff pleaded with the nurse, stating that he needed to promptly see a Doctor about his right index finger, which was in great pain, that also looked infected. The nurse told the plaintiff that he needed to fill out a Sick Call form, But didn't provide one for the plaintiff nor did she examine the plaintiff's finger. The plaintiff didn't receive a Sick Call form until three (3) days later, after repeatedly requesting for one. This was the 26th day of April 2018. The plaintiff filled out another Sick Call form the same day and didn't see the nurse again until the 5th day of May, 2018. On the 5th day of May 2018, (D.C.R.C.F.) Transported the plaintiff to the George County Community Medical Center to the E.R. Dept. At that point from their long delays, once there the Doctor told the plaintiff that they had to amputate a large.

amount of His finger due to a very Bad infection. The plaintiff was currently on disability due to having (Ectri-derma) in His hands, That the Smallest Scratch can cause a Bad infection if not treated properly. George County Community Medical Center admitted the plaintiff in their Medical Center. Afterward the plaintiff spent five (5) days in their Hospital, where His finger was amputated the plaintiff was observed by their staff as He healed to make sure infection wouldn't return. on the 10th day of May 2018, The plaintiff was returned back to (D.C.R.C.F.) where He was placed in a Segregated zone with absolutely no pain medication. and spent the next two (2) weeks constantly requesting for pain medication. The nurse of the facility only changed and cleaned and Examined the plaintiff finger three (3) time in a two (2) week span, leading up to the plaintiff follow-up appointment to remove His Stitches. on the 17th day of May, 2018, The plaintiff was taken to His follow-up appointment, where the Doctor Removed the Stitches and Examined the plaintiff finger to make sure it was healing healthy and infection free.

The Doctor then prescribed pain Medication during that visit, the plaintiff was then returned to (D.C.R.C.F.) with a freshly amputated finger and know pain medication for weeks after-ward, is cruel and unusual punishment prohibited by the 8th amendment. The negligent of the facility from that nurse caused the plaintiff to have to have his finger amputated. The plaintiff is now pleading to this Honorable Court through his Complaint for his relief in this matter.

Respectfully Submitted

Larry E. Fairley
plaintiff pro-se

Signed, this the 24 day of SEPT, 2019

(1.) The plaintiff Declares that the Defendant (Nurse Burns) violated His 8th amendment Constitutional Rights, when she failed to protect the plaintiff from a known risk of infection that caused the amputation of His finger. The Defendant had a duty to personally care and protect the plaintiff from the infection that led to His amputation. Furthermore: The Defendant Nurse Burns, Breached That duty By not promptly providing medical care when the plaintiff requested it. The Breach of duty resulted in serious physical, and emotional injury and damages that ended in a loss of a limb.

(2.) The plaintiff Declares that the Defendant (Sheriff Keith Howard) violated His 8th amendment Constitutional Rights, as Sheriff over the facility, and for allowing a series of actions By others or knowingly refusing to act with others to inflict Constitutional injury. for acquiescence in Constitutional deprivation by subordinate, or Control of Subordinates,

The Defendant after being informed of the violation through the institutions Reports, failed to Remedy the wrong. The Defendant was grossly Negligent in Supervising Subordinates who committed the acts which was wrongfully, for the conduct that show Reckless or Callous indifference to the rights of others. The Defendant Exhibited Negligent to the rights of the plaintiff By failing to act on information indicating that an unconstitutional act were occurring.

Conclusion

The duty of the prison authorities to an incarcerated inmate is well settled law. The 8th amendment prohibits punishments which are incompatible with Evolving Standards of Decency. The State officials are therefore required By the Constitution to provide Medical needs, if the authorities fails to do so, Those needs will not be met. Such a failure may actually produce physical Torture or lingering death.

The plaintiff is suing the Defendants in their individual capacities, They are all operating under color of State laws. The plaintiff is asking this Honorable Court to Grant the plaintiff such other relief as it may deem plaintiff is entitled too.

wherefore, plaintiff Requests that this Court Grant the following Relief.

(Nurse Barnes)

Compensation - Damages \$25,000.00
punities - Damages \$25,000.00
Mental - Anguish \$25,000.00

(Sheriff Keith Hamard)

Compensation - Damages \$25,000.00
punities - Damages \$25,000.00
Mental - Anguish \$25,000.00

Larry E. Fairley
Plaintiff pro se

Signed, this the 24 day of Sept, 2019

in the United States District Court
For the Southern District of Mississippi
Northern Division

Larry E. Fairley R5636

versus

Civil Action No. _____

plaintiff

Sheriff Keith Howard,

nurse Burns

Defendants

Affidavit of Larry E. Fairley

State of Mississippi
County of Greene

personally, appeared before me the undersigned authority in and for the aforesaid jurisdiction, being duly sworn by me does depose and state the following, I Larry E. Fairley do hereby state that the following statements of claim of this Complaint is true and correct as therein stated.

Sworn to and subscribed before me this the 24 day of Sept 2019



Larry Fairley
plaintiff pro-se

Laura Tilley
Notary Public

Comm. Expires

Certificate of Service

I Larry E. Fairley, (plaintiff) do hereby Certify that I have this day Cause a true and correct copy of the above and foregoing Civil Action to Be Served upon all parties listed Below, By United States Mail, on the day of , 20 from the South Mississippi Correctional Institution, P.O. Box 1419 Leokerville, Miss. 39451

U.S. District Court Clerk
501 E Court St. Suite 2500
Jackson, Miss.
39201

U.S. District Court Judge
501 E Court St. Suite
2500
Jackson, Miss. 39201

Sheriff Keith Howard
George County Correctional
Facility 154 Industrial Rd.
Lucedale, Miss. 39452

Nurse Barnes
George County Correctional
Facility 154 Industrial Rd.
Lucedale, Miss. 39452

Larry E. Fairley
Plaintiff pro se

Signed, this the 24 day of SEPT, 2019